

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

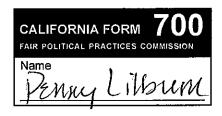
STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

CITY OF HIGHLAND CITY CLERK

Please type or print in ink. NAME OF FILER (FIRST) (MIDDLE) (LAST) LILBURN PENNY **THERESA** 1. Office, Agency, or Court Agency Name CITY OF HIGHLAND Division, Board, Department, District, if applicable Your Position CITY COUNCIL MEMBER If filing for multiple positions, list below or on an attachment. Agency: HIGHLAND REDEVELOPMENT AGENCY Position: AGENCY MEMBER Ņ 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge (Statewide Jurisdiction) Multi-County . County of ___ HIGHLAND ⊠ City of _ Other _ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2010, through December 31, Leaving Office: Date Left _____/___ 2010. (Check one) The period covered is January 1, 2010, through the date of The period covered is _______, through December 31, leaving office. 2010. O The period covered is _______, through the date Assuming Office: Date ____/___ of leaving office. Candidate: Election Year ___ Office sought, if different than Part 1: _ 4. Schedule Summary Check applicable schedules or "None." ► Total number of pages including this cover page: . Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-■ None - No reportable interests on any schedule nerein and in any attached schedules is true and complete. I acknowledge this is I certify under penalty of perjury under the laws of the State of California that 3-28-11 Date Signed . Signatur (month, day, year)

SCHEDULE D Income - Gifts



► NAME OF SOURCE	► NAME OF SOURCE
BURRTEC WASTE MANAGEMENT	HIGHLAND AREA CHAMBER OF COMMERCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
9890 CHERRY AVE, FONTANA, CA 92335	P.O. BOX 455, HIGHLAND, CA 92346
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
WASTE	BUSINESS ADVOCATE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
2 <u> </u>	2 18 10 \$ 35.00 POLIT. BREAKFAST
1 , 21 , 10	
➤ NAME OF SOURCE	▶ NAME OF SOURCE
SAN MANUEL BAND OF MISSION INDIANS	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
777 San Manuel Blvd., Highland, 92346	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
TRIBAL CASINO	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
4 , 19 , 10 _{\$} 125.00 CHARITY GOLF TOU	
10 , 02 , 10 _{\$} 126.00 CHARITY DINNER	\$
► NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	[s
Comments:	